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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of: Illinois	
(State) Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pá	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Dorothy	
	Write the name that is on	First name	First name
	your government-issued picture identification (for example, your driver's license or passport	A Middle name	Middle name
		Abiola	Middle Haine
		Last name	Last name
	Bring your picture identification to your	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Sum (St., St., II, III)	Suffix (St., St., II, III)
2.	All other names you		
	have used in the last	First name	First name
	8 years Include your married or maiden names.	Middle name	Middle name
		Wilderfame	Middle Harie
		Last name	Last name
		First name	First name
			, , , , , , , , , , , , , , , , , , , ,
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits	XXX - XX- 9173	xxx - xx-
	of your Social Security number or	OR	OR
	federal Individual Taxpayer	9 xx - xx-	9 xx - xx-
	Identification number (ITIN)		

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Debtor 1 Dorothy First Name	A Abiola Middle Name Last Name	Case number (if known)
riist Name	Middle Name Last Name	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years	Business name	Business name
Include trade names and doing business as names	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	4129 W. Van Buren St, Apt 2 Number Street	Number Street
	Chicago Illinois 60624	77.0.4
	City State Zip Code Cook	City State Zip Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
6. Why you are choosing this district	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor	1 Dorothy	A	Abiola	_ Case number (if knd	own)
	First Name	Middle Name	Last Name		
Part 2:	Tell the Court Abo	ut Your Bankruptcy Cas	e		
Bar	chapter of the ikruptcy Code you choosing to file ler		scription of each, see <i>Notice Re</i> a. Also, go to the top of page 1 a		C. § 342(b) for Individuals Filing for opriate box.
8. Hov	w you will pay the	more details about he cashier's check, or m may pay with a credit I need to pay the fee Individuals to Pay You I request that my fee judge may, but is not the official poverty lire.	ow you may pay. Typically, if oney order If your attorney card or check with a pre-prine in installments. If you choos our Filing Fee in Installments be be waived (You may request required to, waive your fee, in that applies to your family on, you must fill out the App	you are paying the is submitting you nted address. use this option, sign (Official Form 103 at this option only and may do so on size and you are to see the submitted in the su	the clerk's office in your local court for e fee yourself, you may pay with cash, r payment on your behalf, your attorney an and attach the <i>Application for SA</i>). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
ban	ve you filed for kruptcy within the 8 years?	Ves. District District District	Whe	MM / DD / YYYY en MM / DD / YYYY	Case number Case number Case number
cas beir spo filin you par	any bankruptcy es pending or ng filed by a use who is not g this case with , or by a business tner, or by an liate?	Ves. Debtor District Debtor District	Who	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
	you rent your idence?	✓ No. Go to lir	ne 12.		b you want to stay in your residence? St You (Form 101A) and file it with

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Abiola Debtor 1 Dorothy __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Dorothy
 A
 Abiola
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Part 6: Answer These Questions for Reporting Purposes 16. What kind of debts do you have? 16. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 16. No. Go to line 16b. 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. 18. No. Go to line 16c. 19. Yes. Go to line 17. 19. State the type of debts you owe that are not consumer debts or business debts. 19. Are you filing under Chapter 7. Go to line 18. 19. No. I am not filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?	_						
"incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under Chapter 7. Go to line 18. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?							
Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?	 "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. ✓ Yes. Go to line 17. 						
property is excluded and administrative No. expenses are paid that Yes. funds will be available for distribution to unsecured creditors?							
18. How many creditors do you estimate that you owe? □ 1-49 □ 1,000-5,000 □ 5,001-10,000 □ 50,001-100,000 □ 10,001-25,000 □ 10,001-25,000 □ 10,001-25,000 □ More than 100,000 □ 200-999							
19. How much do you estimate your assets to be worth? □ \$0-\$50,000 □ \$1,000,001-\$10 million □ \$500,000,001-\$1 billion □ \$1,000,000,001-\$50 million □ \$1,000,000,001-\$50 billion □ \$10,000,000,001-\$50 billion □ \$100,000,001-\$50 million □ \$100,000,001-\$50 billion □ \$100,000,001-\$50 million □ \$100,000,001-\$50 billion	l						
20. How much do you estimate your liabilities to be? 30-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion \$1,000,000,001-\$50 million \$1,000,000,001-\$10 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$10 billion \$10,000,000,001-\$50 billion \$100,000,001-\$50 million \$100,000,001-\$50 \$100,000,000,001-\$50 million \$100,000,000,001-\$100 million \$100,000,000,000-\$100 million \$100,000,000,000-\$100 million \$100,000,000-\$100 million \$1	ı						
Part 7: Sign Below	_						
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	13						
/s/ Dorothy Abiola Signature of Debtor 1 Executed on							

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Debtor 1 Dorothy	Α	Abiola	Case number (if k	known)
First Name	Middle Name	Last Name	<u> </u>	
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in w	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the	information in the schedu	ules filed with the petition is incorrect.
attorney, you do not	4.0			
need to file this page.	/s/ Mike Miller		Date	3/6/2017
	Signature of Attorney	for Debtor	M	M / DD / YYYY
	Mike Miller			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3122568728	Email address	mmiller@semradlaw.com
			Illinois	
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Dorothy	Α	Abiola				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
Case number (lf known)	-		(State)				

	Check if	this	is	an
_	amende	d filir	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$16,649.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$10,049.00
1c. Copy line 63, Total of all property on Schedule A/B	\$16,649.00
rt 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$20,859.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$90.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	ф14.000 F0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$14,966.53
Your total liabilities	\$35,915.53
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	\$3,507.64
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	

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Deb				Case number (if known)	Case number (if known)					
Part -	First Name Answer These O	Middle Name	Last Name tive and Statistical Record	ls.						
[]	re you filing for bankrup	tcy under Chapters 7, 11, o	r 13?	this form to the court with your other sch	nedules.					
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
	8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$3,438.89									
9.	Copy the following spec	copy the following special categories of claims from Part 4, line 6 of Schedule E/F:								
	From Part 4 on Schedu	e E/F, copy the following:		Total claim						
	9a. Domestic support ob	igations (Copy line 6a.)		\$0.00						
	9b. Taxes and certain oth	er debts you owe the govern	ment. (Copy line 6b.)	\$0.00						
	9c. Claims for death or pe	ersonal injury while you were	intoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy	line 6f.)		\$0.00						
	9e. Obligations arising ou priority claims. (Copy line		or divorce that you did not report	\$0.00 stas						
	9f. Debts to pension or p	rofit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00						

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to id	entify your case:				Ī		
		• •			Abiala			
Debtor 1	Dorothy First Name		A Middle Na	me	Abiola Last Name			
Debtor 2								
(Spouse, if fil	ing) First Name		Middle Na	me	Last Name			
	ates Bankruptcy C	ourt for the: No	rthern		District of Illinois (State)			
Case num (If known)	ber							
Officia	ıl Form 10	6A/B						Check if this is an amended filing
Sched	dule A/B:	Property	/					12/1
category v responsibl write your	where you think in e for supplying of name and case	t fits best. Be a correct informat number (if know	s complete and ion. If more spa n). Answer eve	d accu ace is ery que	set only once. If an asset fits in m rate as possible. If two married poneeded, attach a separate sheet estion. Other Real Estate You Own or	eople are to this fo	e filing together, both a rm. On the top of any a	re equally
			_		esidence, building, land, or similar			
7. DO YOU	No. Go to Part 2	y legal of equita	ible lilterest lil	ally it	sidelice, building, land, or sillina	propert	y:	
	Yes. Where is the	property?						
				What i	s the property? Check all that apply	/	Do not deduct secured	claims or exemptions. Put
1.1	-				gle-family home	,.	the amount of any secu	red claims on Schedule D:
	Street address, if	available, or othe	r description	Du	plex or multi-unit building			ims Secured by Property.
				Co	ndominium or cooperative		Current value of the entire property?	Current value of the portion you own?
				ш '	nufactured or mobile home			
	Number Str	eet		La			Describe the nature o	f vour ownership
					restment property neshare		interest (such as fee s	simple, tenancy by
	City	State 2	Zip Code		ner		the entireties, or a life	e estate), if known.
					as an interest in the property? Ch	neck	Check if this is co	mmunity property
				one.	btor 1 only			
					btor 2 only			
					btor 1 and Debtor 2 only			
				At	least one of the debtors and another	r		
					information you wish to add abou ty identification number:	t this ite	m, such as local	
If you	own or have more	e than one, list he		p. 0p0.	<u> </u>			
				What i	s the property? Check all that apply	y.		claims or exemptions. Put
1.2	Street address, if	available, or othe	r description		gle-family home			red claims on Schedule D: nims Secured by Property.
			•		plex or multi-unit building		Current value of the	Current value of the
					ndominium or cooperative nufactured or mobile home		entire property?	portion you own?
				La				
	Number Str	eet		Inv	restment property		Describe the nature o	
	0		7. 0 1		neshare ner		interest (such as fee s the entireties, or a life	
	City	State Z	Zip Code		161			
				Who h one.	as an interest in the property? Ch	reck	Check if this is co (see instructions)	mmunity property
					btor 1 only		Ц	
					btor 2 only			
				De	btor 1 and Debtor 2 only			
				At	least one of the debtors and another	•		
					information you wish to add abou ty identification number:	t this ite	m, such as local	

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Debtor 1		A	Abiola	Case numbe	r (if known)	
	First Name	Middle Name	Last Name			
1.3Stree	et address, if available, or ot		What is the property? Check all that a Single-family home Duplex or multi-unit building	pply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the
<u> </u>	Olavet.	[[Condominium or cooperative Manufactured or mobile home Land		entire property?	portion you own?
Nun City	State	Zip Code	Investment property Timeshare Other	_	Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
		[[[Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano		Check if this is co (see instructions)	mmunity property
			Other information you wish to add a property identification number:	bout this item,	such as local	
you ha	ve attached for Part 1. Wi	rtion you own for a	all of your entries from Part 1, inclu	ding any entrie	s for pages	
Do you ow you own th	nat someone else drives. If y ns, trucks, tractors, sport ut	equitable interest you lease a vehicle,	t in any vehicles, whether they are r also report it on Schedule G: Executory cycles	-	-	
		.			5	
3.1	Make Model: Year: Approximate mileage:	Nissan Juke 2014 53000	Who has an interest in the propone. Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Other information:	33000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	l another	Current value of the entire property? \$13025.00	Current value of the portion you own? \$13025.00
			Check if this is community prinstructions)	property (see		
3.2	Make Model: Year:		Who has an interest in the propone.	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	d another	Current value of the entire property?	Current value of the portion you own?
			Check if this is community prinstructions)	property (see		

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otor 1	Dorothy First Name	A Middle Name	Abiola Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions)	nly rs and another	the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D</i> nims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:	<u></u>	Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is commu	nly rs and another	the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D</i> nims Secured by Property. Current value of the portion you own?
			instructions)			
	mples: Boats, trailers, motor No Yes Make	•	er recreational vehicles, other t, fishing vessels, snowmobiles, Who has an interest in the	motorcycle accessori	Do not deduct secured	claims or exemptions. Put
Exa	mples: Boats, trailers, motor No Yes	•	er recreational vehicles, other t, fishing vessels, snowmobiles,	motorcycle accessori property? Check hly rs and another	Do not deduct secured the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D</i> iims Secured by Property. Current value of the portion you own?

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De	ebtor 1	Dorothy First Name	A Middle Name	Abiola Last Name	Case number (if known)	
Pa	rt 3:	Describe Y	our Personal and Household Iter			
D	o you	own or hav	e any legal or equitable interest	in any of the follow	ing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examp	_	and furnishings liances, fumiture, linens, china, kitchenw	/are		
<u>√</u>	No Yes. [Describe	Used Furniture			\$800.00
		tronics bles: Television	s and radios; audio, video, stereo, and d	ligital equipment; comp	uters, printers, scanners; music	
<u> </u>		Describe	Used Electronics - Laptop			\$500.00
			ue ind figurines; paintings, prints, or other a in, or baseball card collections; other col			
	No Yes. [Describe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other hobby e s; carpentry tools; musical instruments	equipment; bicycles, po	ol tables, golf clubs, skis; canoes	
✓	No Yes. [Describe				-
	0. Fire		es, shotguns, ammunition, and related e	equipment		
V	No	700. 1 101010, 1111	oo, onotgano, ammamaon, ana rolatoa e	oquipmont		
	Yes. [Describe				
	1. Clo		clothes, furs, leather coats, designer wea	ar, shoes, accessories		
	No					
✓	Yes. [Describe	Used Clothing			\$600.00
		-	ewelry, costume jewelry, engagement rin r	ngs, wedding rings, hei	rloom jewelry, watches, gems,	
<u> ✓</u>	No Yes. [Describe	Jewelry			\$100.00
		n-farm animal bles: Dogs, cats	s s, birds, horses			
	No Yes. [Describe				
1	4. Any	other person	al and household items you did not a	already list, including	any health aids you did not list	
✓	No					
	Yes. [Describe				
			lue of all of your entries from Part 3, number here	including any entries	for pages you have attached	\$3300.00

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Abiola Debtor 1 Dorothy Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: TCF \$300.00 17.1. Checking account: \$0.00 17.2. Checking account: Achieve - Prepaid Card 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Deb ¹	tor 1 Dorothy	Α	Abiola	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instrumer		ers' checks, promissory no	tes, and money orders.	
21.	Retirement or pens		(b) theift conings associate		
		n IRA, ERISA, Keogn, 401(k), 403	(b), thint savings accounts	s, or other pension or profit-sharing plans	
	✓ No Vos. List oach	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:	-	-	
		Retirement account:			
		Keogh:			
		Additional account:			
			-		
		Additional account:			
22.		sed deposits you have made so the ts with landlords, prepaid rent, pu			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit	::		
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:	•		
23.	Annuities (A contrac	et for a periodic payment of money	to you, either for life or for	r a number of years)	
	✓ No	Lancaca and decadation			
	Yes	Issuer name and description:			

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Debt	tor 1 Dorothy First Name	A	Abiola	Case number (if known)	
24.		Middle	Name Last Name count in a qualified ABLE program, or und	er a qualified state tuition program	
24.		530(b)(1), 529A(b), and 529		ier a quaimeu state tuition program.	
	✓ No	Institution name and descrip	ption. Separately file the records of any intere	sts.11 U.S.C. § 521(c):	
	Yes	·		,	
25.		able or future interests in p or your benefit	property (other than anything listed in line	e 1), and rights or powers	
	√ No				
	Yes. Desc	ribe			
26.			secrets, and other intellectual property es, proceeds from royalties and licensing agre	eements	
	✓ No				
	Yes. Desc	ribe			
27.	Licenses fra	nchises, and other general	Lintangibles		
21.			ses, cooperative association holdings, liquor	licenses, professional licenses	
	✓ No				
	Yes. Desc	cribe			
Mor	ney or proper	ty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or proper				portion you own?
					portion you own? Do not deduct secured claims or exemptions.
	Tax refunds on No Yes. Give s	wed to you	Anticipated 2016 tax refund	Federal:	portion you own? Do not deduct secured
	Tax refunds on No Yes. Give s about your	wed to you specific information	Anticipated 2016 tax refund	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on No Yes. Gives about your a and to	wed to you specific information It them, including whether already filed the returns Ithe tax years	Anticipated 2016 tax refund		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on No Yes. Give s about you a and t	wed to you specific information It them, including whether already filed the returns Ithe tax years	Anticipated 2016 tax refund spousal support, child support, maintenance	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	wed to you specific information It them, including whether already filed the returns Ithe tax years		State: Local: , divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	wed to you specific information It them, including whether already filed the returns Ithe tax years		State: Local: , divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	wed to you specific information It them, including whether already filed the returns Ithe tax years		State: Local: , divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	wed to you specific information It them, including whether already filed the returns Ithe tax years		State: Local: Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	wed to you specific information It them, including whether already filed the returns Ithe tax years		State: Local: Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past ✓ No Yes. Give s	wed to you specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, s specific information		State: Local: Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp	specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, s specific information		State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past ✓ No Yes. Give s Other amount Examples: Unp Soc	specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, s specific information	spousal support, child support, maintenance	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unpp	specific information It them, including whether already filed the returns the tax years It It due or lump sum alimony, s specific information	spousal support, child support, maintenance	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$24.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00

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Deb	tor 1 Dorothy	A	Abiola	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance po Examples: Health, disability		avings account (HSA); credit, h	omeowner's, or renter's insurance	
	No ✓ Yes. Name the insuran	Cor	mpany name:	Beneficiary:	Surrender or refund value:
	of each policy and list		ted Insurance - Whole		\$0.00
					_
					_
32.	Any interest in property of If you are the beneficiary of property because someone	f a living trust, expect proce		y, or are currently entitled to receive	
	✓ No				
	Yes. Describe				
33.	Claims against third part Examples: Accidents, empl		nave filed a lawsuit or made ee claims, or rights to sue	a demand for payment	
	✓ No				
	Yes. Describe				
34.	Other contingent and un to set off claims	liquidated claims of ever	ry nature, including counterd	claims of the debtor and rights	
	✓ No				
	Yes. Describe				
35.	Any financial assets you	did not already list			
	✓ No				
	Yes. Describe				
36.		•	rt 4, including any entries fo		\$324.00
	ior rait 4. Write that ha				
		D.1.1.1D			
Part 37			ty You Own or Have an Ir	nterest In. List any real estate in Pa	π1.
	No. Go to Part 6.	. 5 2. 24	January Folked Pi		Current value of the
	Yes. Go to line 38.				portion you own? Do not deduct secured claims
38.	Accounts receivable or o	commissions you already	earned		or exemptions
	✓ No	-			
	Yes. Describe				
39.	Office equipment, furnish Examples: Business-related		dems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, ele	ctronic devices
	✓ No				
	Yes. Describe				

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Deb	tor 1 Dorothy	A	Abiola	Case number (if known)	
10	First Name	Middle Name	Last Name	and the de	
40.		equipment, supplies you	use in business, and tools of y	our trade	
	✓ No				
	Yes. Describe				
41.	Inventory				
	✓ No				
	Yes. Describe				
	Too. Boodingo				
42.	Interests in partnersh	nips or joint ventures			
	✓ No				
	Yes. Give specific		Name of entity:	% of ownership:	
	information about				
	them				
					-
40	Custamas lista mailina	ı lists, or other compilat			_
43.	Customer lists, mailing	lists, or other compilat	ions		
	✓ No				
	Yes. Do your lists i	nclude personally identifial	ole information (as defined in 11	U.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	ribe			
44.	Any business-related	property you did not alr	eady list		
	✓ No				
	Yes. Give specific				
	information				<u> </u>
					
			art 5, including any entries fo		
for Pa	art 5. Write that number	er nere			
Pari	6: Describe Any F	arm- and Commercia	al Fishing-Related Propert	y You Own or Have an Interest In.	
	If you own or have ar	n interest in farmland, list it i	n Part 1.		
46.	Do you own or have a	ny legal or equitable int	erest in any farm- or commer	cial fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47.				portion you own? Do not deduct secured claims
	Ш				or exemptions
47.	Farm animals				
	Examples: Livestock, p	oultry, farm-raised fish			
	✓ No				
	Yes. Describe				
1	-				

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Debto	or 1 Dorothy First Name	A Middle Name	Abiola Last Name	Case number (if known)	
48.	Crops-either grov	ving or harvested			
	No Yes. Describe.				
49.	Farm and fishing	equipment, implements, machinery, fix	tures, and tools of tr	ade	
	No Yes. Describe.				
50.	Farm and fishing	supplies, chemicals, and feed			
	✓ No				
	Yes. Describe.				
	-				
51.	Any farm- and co	mmercial fishing-related property you o	lid not already list		
	✓ No				
	Yes. Describe.				
EO A 4	مراده ما الما	of all of varie authion from Dout 6 inch.	dina any antrias for	anno vou bovo ottochod	
		e of all of your entries from Part 6, included the modern here		eages you have attached	
Part 7	Describe Al	l Property You Own or Have an Int	erest in That You	Did Not List Above	
		r property of any kind you did not alread tickets, country club membership	dy list?		
١.,	, ✓ No				
i	Yes. Give spec	sific			
	information				
54. Ad	ld the dollar value	of all of your entries from Part 7. Write	that number here		
		·			
	I takaba Taka	de effect Best efficie Ferre			
Part 8	LIST THE TOTA	als of Each Part of this Form			
55. P a	art 1: Total real e	state, line 2			
56. p a	art 2 total vehicle	es, line 5	\$13025.00		
57. Pa	art 3: Total persor	nal and household items, line 15	\$3300.00	<u>-</u>	
58. Pa	art 4: Total financ	ial assets, line 36	\$324.00		
59. P	art 5: Total busin	ess-related property, line 45			
60. P	art 6: Total farm-	and fishing-related property, line 52			
61. P	art 7: Total other	property not listed, line 54			
62. T c	otal personal pro	perty. Add lines 56 through 61	\$16649.00		+ \$16649.00
				Copy personal property total	
00.		0.1. d l. A/D 4.1			\$16649.00
63.To	ιται οτ all property	on Schedule A/B. Add line 55 + line 62			

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Debtor 1	Dorothy	A	Abiola	Case number (if known)	
	First Name	Middle Name	Last Name		_

Schedule A/B: Property. Additional page

Part 3: Describe	Part 3: Describe Your Personal and Household Items					
Do you own or ha	Do you own or have any legal or equitable interest in any of the following items?					
7.2. Electronics						
No ✓ Yes. Describe	Used Electronics - Stove, Refrigerator, 2 TV's, 2 Cell Phone,	\$1300.00				

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Fill in this information to identify your case:					
Debtor 1	Dorothy	А	Abiola		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
Case number (If known)			(State)		

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt					
1.	Which set of exemptions are you claim	•				
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)			
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A	N/B that you claim as e	exempt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description: Nissan Juke, 2014 Line from Schedule A/B: 03	\$13,025.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)		
	Brief description: Used Electronics - Laptop Line from Schedule A/B: 07	\$500.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case?			

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description: Used Furniture Line from	\$800.00	\$800.00 100% of fair market value, up to any	735 ILCS 5/12-1001(b)
Schedule A/B: 06		applicable statutory limit	
Brief description:	\$1,300.00	\$1,300.00	735 ILCS 5/12-1001(b)
Used Electronics - Stove, Refrigerator, 2 TV's, 2 Cell Phone,		100% of fair market value, up to any applicable statutory limit	_
Line from Schedule A/B: 07			
Brief description:	\$600.00	\$600.00	735 ILCS 5/12-1001(a)
Used Clothing Line from Schedule A/B: 11		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$100.00	\$100.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 12		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$300.00	\$300.00	735 ILCS 5/12-1001(b)
Checking account, TCF Line from Schedule A/B: 17		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$0.00	☑ \$0	735 ILCS 5/12-1001(b)
Checking account, Achieve - Prepaid Card Line from		100% of fair market value, up to any applicable statutory limit	_
Schedule A/B: 17			705 00 5 (40 4004/9
Brief description: United Insurance - Whole	\$0.00	\$0 100% of fair market value, up to any	735 ILCS 5/12-1001(f)
Line from Schedule A/B: 31		applicable statutory limit	
Brief description:	\$24.00		735 ILCS 5/12-1001(b)
Federal, Anticipated 2016 tax refund		\$24.00 100% of fair market value, up to any	_
Line from Schedule A/B: 28		applicable statutory limit	

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Fill in	this information to identify your o	case:		I		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Debto	or 1 <u>Dorothy</u> First Name	A Middle Name	Abiola Last Name			
Debto		Middle Name	Last Name			
	e, if filing) First Name	Middle Name	Last Name			
United	d States Bankruptcy Court for the:	Northern	District of Illinois			
Case (If know	number		(State)			
<u> </u>	icial Form 106D					Check if this is a
		tors Who Hay	e Claims Secure	ed by Pron		amended filing
			are filing together, both are equa- per the entries, and attach it to t			
	and case number (if known).	,	,	•		•
1. [Do any creditors have claims	secured by your property	<i>l</i> ?			
ſ	No. Check this box and sub	mit this form to the court w	ith your other schedules. You hav	e nothing else to rep	ort on this form.	
Ī	Yes. Fill in all of the informati	on below.				
Part	1: List All Secured Claims					
2.	List all secured claims. If a creseparately for each claim. If more in Part 2. As much as possible, liname.	than one creditor has a parti-	cular claim, list the other creditors	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports	Column C Unsecured portion If any
_	0 1 1 0 1104				this claim	
2.1	Santander Consumer USA Creditor's Name	 Describe the property t 	hat secures the claim:	\$20,359.00	\$13,025.00	\$7,334.00
	8585 N Stemmons Fwy	Nissan Juke Value: \$13				
	Number Street	_ Contingent	the claim is: Check all that apply.			
		=				
	Dallas TX 75247 City State ZIP Code	Unliquidated				
	Who owes the debt? Check one	e. Disputed				
	Debtor 1 only	Nature of lien. Check all	that apply.			
	Debtor 2 only	An agreement you m	ade (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	_ ′	as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from	·			
	Check if this claim relates	–				
	to a community debt	Other (including a rig	Int to onset)			
	Date debt was 2/1/2015 incurred	- Last 4 digits of accoun	t number1000			
2.2	Aarons Creditor's Name	 Describe the property t 	hat secures the claim:	\$500.00	\$500.00	\$0.00
	2935 W. 159th Street	Used Electronics - Lapto				
	Number Street	_	the claim is: Check all that apply.			
	-	Contingent				
	Markham IL 60428 City State ZIP Code	Unliquidated				
	Who owes the debt? Check one	I I Disputed				
	✓ Debtor 1 only	Nature of lien. Check all	that apply.			
	Debtor 2 only Debtor 1 and Debtor 2 only	An agreement you m car loan)	ade (such as mortgage or secured			
	At least one of the debtors	Statutory lien (such a	as tax lien, mechanic's lien)			
	and another	Judgment lien from	a lawsuit			
	Check if this claim relates to a community debt	Other (including a rig	ht to offset)			
	Date debt was incurred	- Last 4 digits of accoun	t number			
	Add the dollar value o here:	f your entries in Column A	on this page. Write that number	\$20,859.00		

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		D	ocument Page 24	l of 75			
Fill in this inf	ormation to identify your o	case:					
Debtor 1	Dorothy First Name	A Middle Name	Abiola Last Name	_			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_			
United States	Bankruptcy Court for the:	Northern	District of Illinois	_			
Case numbe (If known)	r		(State)	_			
Official	Form 106E/F				Chec	k if this is an	amended filing
Sched	lule E/F: Cre	editors Who	Have Unsecu	ıred Claims			12/15
Form 106A/E claims that a the entries in known).	i) and on Schedule G: Exe are listed in Schedule D: (ecutory Contracts and U Creditors Who Hold Clair ttach the Continuation I	nat could result in a claim. Also Inexpired Leases (Official Forn In Secured by Property. If mon Page to this page. On the top	n 106G). Do not include a re space is needed, copy	ny creditors the Part yo	with partial u need, fill it	lly secured out, number
No. Ye 2. List all listed, ic As muc	of your priority unsecure dentify what type of claim it h as possible, list the claims	d claims. If a creditor has is. If a claim has both prics in alphabetical order acc	s more than one priority unsecure prity and nonpriority amounts, lis ording to the creditor's name. If a particular claim, list the other c	t that claim here and show you have more than two pr	both priority	and nonprior	ity amounts.
(For an	explanation of each type of	claim, see the instruction	s for this form in the instruction	booklet.)	Total	Priority	Nonpriority
					claim	amount	amount
Priority PO Bo Numb	part of Revenue / Creditor's Name px 64338 er Street uptcy Section		Last 4 digits of account num When was the debt incurred As of the date you file, the capply.	? n/a	\$90.00	\$90.00	\$0.00
	go Illinois State ncurred the debt? Check ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only	60664 Zip Code one.	Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligation				
	t least one of the debtors ar	nd another	Taxes and certain other de government	bts you owe the			

Check if this claim relates to a community debt

Is the claim subject to offset?

✓ No Yes Claims for death or personal injury while you were

Other. Specify 2016 Taxes

intoxicated

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Debto	or 1 Dorothy First Name	A Middle Name	Abiola Last Name	Case number (if known)					
Part 2		IPRIORITY Unsecure							
3. D	No. You have nothing t	priority unsecured claim	s against you?	e court with your other schedules.					
4. L u lf	nsecured claim, list the cred	itor separately for each cla	im. For each claim li	r of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou	cluded in Part 1.				
					Total claim				
4.1	Bank of America			Last 4 digits of account number	\$10.00				
	Nonpriority Creditor's Name 1701 River Oaks Dr # D	е		When was the debt incurred? n/a					
	Number Street			As of the date you file, the claim is: Check all that apply. Contingent					
				Unliquidated					
	Calumet City City		409 Code	Disputed					
	Who incurred the debt?		Couc	Type of NONPRIORITY unsecured claim:					
	Debtor 1 only			Student loans					
	Debtor 2 only			Obligations arising out of a separation agreement or					
	Debtor 1 and Debtor 2 only			divorce that you did not report as priority claims					
	At least one of the debtors and another			Debts to pension or profit-sharing plans, and other similar debts					
	Check if this claim relates to a community debt Is the claim subject to offset?			✓ Other. Specify NSF					
	No Yes	iset:							
4.2	CAPITAL ONE AUTO FINA	N		Lock Addinite of account mumber 1001	\$2,246.00				
	Nonpriority Creditor's Name 3901 DALLAS PKWY			Last 4 digits of account number 1001 When was the debt incurred? 8/1/2011					
	Number Street			As of the date you file, the claim is: Check all that apply.					
				Contingent					
	PLANO City		093 Code	Unliquidated					
	Who incurred the debt?			Disputed					
	Debtor 1 only			Type of NONPRIORITY unsecured claim:					
	Debtor 2 only			Student loans					
	Debtor 1 and Debtor 2			Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	At least one of the deb			Debts to pension or profit-sharing plans, and other similar					
	_	elates to a community d	ebt	debts Other. Specify 074 Automobile					
	Is the claim subject to of	nset?		Other. Specify074 Automobile					
	Yes								
4.3	CCI				\$418.00				
7.0	Nonpriority Creditor's Name	е		Last 4 digits of account number 4734	Ψ+10.00				
	501 Greene Street # 302 Number Street			When was the debt incurred? 12/1/2013					
				As of the date you file, the claim is: Check all that apply. Contingent					
	Augusta		901	Unliquidated					
	City Who incurred the debt?		Code	Disputed					
	Debtor 1 only	ondok ond.		Type of NONPRIORITY unsecured claim:					
	Debtor 2 only			Student loans					
	Debtor 1 and Debtor 2	only		Obligations arising out of a separation agreement or					
	At least one of the deb	tors and another		divorce that you did not report as priority claims					
	Check if this claim re	elates to a community d	ebt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to of	ffset?		Collection; Collecting for ORIGINAL CREDITOR: 10					
	Yes			COMMONWEALTH EDISON Other. Specify COMPANY					

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Abiola Debtor 1 Dorothy Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 City of Chicago - Parking and red Light Tickets \$488.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Tickets Is the claim subject to offset? **✓** No T Yes CREDIT MANAGEMENT LP \$226.00 1340 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 11/1/2014 PO Box 118288 Number As of the date you file, the claim is: Check all that apply. Contingent 75011 Carrollton Texas Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CRÉDITOR: WOW **✓** No Other. Specify INTERNET CABLE PHONE - 1 Yes **CREDITORS DISCOUNT & A** 4.6 \$975.00 Last 4 digits of account number Nonpriority Creditor's Name 11/1/2012 415 E MAIN ST When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent STREATOR 61364 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt

✓ No

Yes

Is the claim subject to offset?

✓

Other. Specify

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

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Abiola Debtor 1 Dorothy Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 **CREDITORS DISCOUNT & A** \$466.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/1/2011 415 E MAIN ST Number Street As of the date you file, the claim is: Check all that apply. Contingent **STREATOR** Illinois 61364 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes **CREDITORS DISCOUNT & A** \$371.00 Last 4 digits of account number 1466 Nonpriority Creditor's Name 415 E MAIN ST When was the debt incurred? 5/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent STREATOR Illinois 61364 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes CUSTOM COLL SRVS INC 4.9 \$200.00 Last 4 digits of account number _ Nonpriority Creditor's Name 55 E 86TH AVE STE A When was the debt incurred? 12/1/2012 Street Number As of the date you file, the claim is: Check all that apply. Contingent India<u>na</u> MERRILLVILLE 46410 Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims

No

Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify ____

Debts to pension or profit-sharing plans, and other similar

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

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Abiola Debtor 1 Dorothy Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 **Emerald Financial Services** \$937.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 30040 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 33630 Tampa Florida City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Unsecured Is the claim subject to offset? **✓** No Yes I C SYSTEM INC \$347.00 4.11 Last 4 digits of account number __ Nonpriority Creditor's Name 12/1/2016 When was the debt incurred? PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL 55164 Minnesota Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: DIRECTV **✓** No Yes John H. Stroger, Jr. Hospital of Cook County 4.12 \$488.53 Last 4 digits of account number Nonpriority Creditor's Name PO Box 70121 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60673 Chicago Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Other. Specify Is the claim subject to offset? **✓** No

Yes

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Abiola Debtor 1 Dorothy Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 MONTGOMERY WARD \$401.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/1/2011 1112 7TH AVE Number As of the date you file, the claim is: Check all that apply. Contingent MONROE Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes 4.14 Peoples Gas \$250.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Unsecured Is the claim subject to offset? **✓** No Yes PROFESSIONAL CREDIT SE 4.15 \$122.00 Last 4 digits of account number Nonpriority Creditor's Name 400 INTERNATIONAL WAY When was the debt incurred? 10/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent SPRINGFIELD 97477 Oregon Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA

Yes

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Abiola Debtor 1 Dorothy Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 STELLAR RECOVERY INC \$723.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/1/2014 1327 HWY 2 W Number Street As of the date you file, the claim is: Check all that apply. Contingent **KALISPELL** Montana 59901 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: DISH **✓** No Other. Specify **NETWORK** Yes 4.17 TRUST REC SV \$6,288.00 Last 4 digits of account number 0078 Nonpriority Creditor's Name 541 OTIS BOWEN DRI When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent MUNSTER Indiana 46321 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes URBAN PARTNERSHIP BANK 4.18 \$10.00 Last 4 digits of account number Nonpriority Creditor's Name 7054 S JÉFFERY BLVD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CHICAGO Illinois 60649 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Unsecured Is the claim subject to offset? **✓** No

Yes

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Abiola Debtor 1 Dorothy _ Case number (if known) First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Arnold Scott Harris On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 111 W. Jackson # 600 Line 4.4 Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured 60604 Chicago Illinois Last 4 digits of account number City State Zip Code Linebarger Goggan Blair & Samplson, LLP On which entry in Part 1 or Part 2 did you list the original creditor? Po Box 659443 Line 4.4 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured San Antonio 78265 Texas Last 4 digits of account number

State

Zip Code

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Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	statistical reporting purposes only. 28 U.S.C. §159.	
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
IIOIII FAIT I	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$90.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$90.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$14,966.53	
	6i Total Add lines 6f through 6i	6i	\$14,966.53	

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Dorothy	Α	Abiola	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)	_		(Glate)	

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this infor	mation to identify yo	ur case:		
Debtor 1	Dorothy	Α	Abiola	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for t	he: Northern	District of Illinois	
0			(State)	
Case number (If known)				
				Check if this is an
				amended filing
Official	Form 106	Ⅎ		
				
Schedul	e H: Your C	odebtors		12/15
No No Yes 2. Within the Idaho, Lor	e last 8 years, have usiana, Nevada, New Go to line 3.	Mexico, Puerto Rico, Texas, Wa	perty state or territory? (Cashington, and Wisconsin.)	Community property states and territories include Arizona, California,
Yes.	Did your spouse, fo	rmer spouse, or legal equiva	lent live with you at the tim	e?
✓	No			
	Yes. In which comm	nunity state or territory did you	ı live?	Fill in the name and current address of that person.
	Name of your spou	se, former spouse, or legal equi	valent	
	Number Street			
	Number Street			
	City	State	Zip Code	_
again as	a codebtor only if th	at person is a guarantor or c	osigner. Make sure you ha	our spouse is filing with you. List the person shown in line 2 ve listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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		Dui	cument r	aye ss	01 75			
Fill in this in	formation to identify	your case:						
Debtor 1	Dorothy	А	Abiola					
	First Name	Middle Name	Last Nam	е	- Che	eck if this is:		
Debtor 2 (Spouse, if filing	Eiret Namo	Middle Name	Last Nam	0	- -	An amended fili	ing	
						A supplement s	showing post-	petition chapter 1
the:	Bankruptcy Court for	Northern	District of Illinoi (State			expenses as of		
Case number	-				_	MM / DD / YYY		
, ,	Form 106I					IVIIVI / DD / 111	•	
	le I: Your In	come						12/1
spouse. If me number (if k								
-	ur employment		Debtor 1			Debtor 2		
-	on. re more than one job, eparate page with	Employment status	Employed			Employed		
informatio employers	n about additional	Occupation	Home Care			Warehouse		
	art time, seasonal, or	Employer's name					Sonico Inc	
•	oyed work.	Employer's address	Help At Home, LLC 1 N. State Street, 8th Floor Number Street			Julian Electric Service Inc 406 Plaza Drive Number Street		
•	on may include student naker, if it applies.	Employer's address						
			Chicago City	Illinois State	60602 Zip Code	Westmont City	Illinois State	60559 Zip Code
		How long employed there?	6 years 11 mg	onths		4 months		
Part 2: Given the spouse unleading of the spouse unleading the spouse unleading the spouse that the spouse the spouse th	ve Details About Nonthly income as of the street of the st	Monthly Income the date you file this form e more than one employer,	City 6 years 11 mo	State onths ching to repo	Zip Code rt for any line, v	City 4 months write \$0 in the sp	State	Zip Code
more space	, attach a separate she	et to this form.		For D	Debtor 1	For Debtor 2		
		ary, and commissions (befo , calculate what the monthly			\$2,326.22	0.1	\$2,194.10	

+ \$0.00

\$2,326.22

+ \$0.00

\$2,194.10

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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Debto	or 1Dorothy First Name		Abiola _ast Name		Case number known)			
		dato Nato			For Debtor 1	For Debtor 2 or non-filing spouse		
Сор	y line 4 here		→ 4.	_	\$2,326.22	\$2,194.10		
5. List	all payroll ded							
5a.	Tax, Medicare,	and Social Security deductions	5	a.	\$489.08	\$357.72		
5b.	Mandatory cor	ntributions for retirement plans	5	٥.	\$0.00	\$0.00		
5c.	Voluntary cont	ributions for retirement plans	5	о.	\$0.00	\$0.00		
5d.	Required repay	yments of retirement fund loans	5	d.	\$0.00	\$0.00		
5e.	Insurance		5	э.	\$57.20	\$0.00		
5f.	Domestic supp	ort obligations	51	f.	\$0.00	\$0.00		
5g.	Union dues		5	g.	\$108.68	\$0.00		
5h.	Other deduction	ons. Specify:	5	n. +	\$0.00 +	\$0.00		
6. Add +5h.	the payroll ded	ductions. Add lines 5a + 5b + 5c + 5d + 5e +5f	f + 5g 6		\$654.9 <u>6</u>	\$357.72		
7. Cald	culate total mo	nthly take-home pay. Subtract line 6 from line	4. 7	·	\$1,671.26	\$1,836.38		
8. List	all other incon	ne regularly received:						
	Net income fro business, profe	m rental property and from operating a ession, or farm						
	gross receipts, o	ent for each property and business showing ordinary and necessary business expenses, and			40.00			
	the total monthl	•	8:		\$0.00	\$0.00		
	Interest and di			0.	\$0.00	\$0.00		
	dependent reg	-	a					
		, spousal support, child support, maintenance, ent, and property settlement.	8	o.	\$0.00	\$0.00		
8d.	Unemployment	t compensation	8	d.	\$0.00	\$0.00		
8e.	Social Security	•	8	э.	\$0.00	\$0.00		
	Include cash ass cash assistance	ent assistance that you regularly receive sistance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es	8:	f.	\$0.00	\$0.00		
8g.	Pension or ret	irement income	8	g.	\$0.00	\$0.00		
8h.	Other monthly	income. Specify:	8	n. +	\$0.00 +	\$0.00		
9. Add	all other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	- 8h. 9	. [\$0.00	\$0.00		
		r income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp	10 oouse	o. [\$1,671.26 +	\$1,836.38	=	\$3,507.64
Incl frier	lude contribution nds or relatives.	gular contributions to the expenses that you as from an unmarried partner, members of your amounts already included in lines 2-10 or amounts	household,	your c	lependents, your roomm			
Spe	ecify:						11. +	\$0.00
		n the last column of line 10 to the amount in					12.	\$3,507.64
vvrli	ıe ınaı amount o	n ure summary of scriedules and statistical Sui	minary of C	әпаіП L	ларшиев ани пенацео Da.	ια, τι τι αμμπες		Combined
13. Do	you expect an	increase or decrease within the year after y	you file this	form?	•			monthly income
F	Yes. Explain:							

	Case 17-	06731	Doc 1		03/06/17 ument	Entere Page 3		6/17 12:37:	37 I	Desc Mair	1
Fill in this infor	mation to identify	your case:									
Debtor 1	Dorothy First Name		A Middle Na	me.	Abiola Last Nai	ne.					
Debtor 2	T HOL HAINE		Wild die 14e		Last Hai			Check if this is:			
(Spouse, if filing)	First Name		Middle Na	ıme	Last Na	ne		An amended	filing		
United States E	Bankruptcy Court fo	r the: North	nern		District of Illin		_			ng post-petition bllowing date:	chapter 13
Case number (If known)								MM / DD / Y	YYY	_	
Official	Form 106	3J									
Schedul	e J: Your E	Expens	es								12/1
information. If	e and accurate as more space is nee wer every questio	ded, attach						•		-	ıber
Part 1: Des	cribe Your Hou	sehold									
1. Is this a joi	nt case?										
✓ No. Go	to line 2										
Yes. Do	oes Debtor 2 live i	n a separat	e household	?							
	No										
	Yes. Debtor 2 m	ust file Offici	al Forms 106	J-2, Expe	nses for Sepa	rate Househoi	ld of Debto	r 2.			
2. Do you hav	e dependents?	√ No									
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill of each dep	out this inforr endent	nation for	•	t's relationsl or Debtor 2	nip to	Dependent's age		oes dependent ith you?	t live
	enses include f people other	√ No									

Part 2: **Estimate Your Ongoing Monthly Expenses**

yourself and your dependents?

Yes

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)

 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. 	4.	\$895.00
If not included in line 4:		
4a. Real estate taxes	4a	\$0.00
4b. Property, homeowner's, or renter's insurance	4b.	\$0.00
4c. Home maintenance, repair, and upkeep expenses	4c.	\$0.00
4d. Homeowner's association or condominium dues	4d.	\$0.00

Your expenses

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Debtor 1 Dorothy A Abiola Case number (if known)
First Name Middle Name Last Name

	Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	\$ 0.00
6. Utilities:	
6a. Electricity, heat, natural gas	a. \$180.00
6b. Water, sewer, garbage collection	b. \$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	c. \$230.00
6d. Other. Specify:	6d \$0.00
7. Food and housekeeping supplies	\$583.00
8. Childcare and children's education costs	\$0.00
9. Clothing, laundry, and dry cleaning	\$125.00
10. Personal care products and services	0. \$175.00
11. Medical and dental expenses	1. \$75.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments	2. \$380.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	3. \$0.00
14. Charitable contributions and religious donations	4. \$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	5a \$102.00
15b. Health insurance	\$0.00
15c. Vehicle insurance	5c \$227.00
15d. Other insurance. Specify:	5d \$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	
Specify:	\$0.00
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	7a \$0.00
17b. Car payments for Vehicle 2	'b \$0.00
17c. Other. Specify:	7c \$0.00
17d. Other. Specify:	'd \$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	3.
19.Other payments you make to support others who do not live with you. Specify:	9. \$0.00
20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	9. 40.00
20a. Mortgages on other property)a \$0.00
20b. Real estate taxes.	
20c. Property, homeowner's, or renter's insurance	
20d. Maintenance, repair, and upkeep expenses.	
20e. Homeowner's association or condominium dues	

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First Name Middle Name Last Name 21.Other. Specify: 21	
21. Other. Specify: 21	
	\$0.00
	972.00
22a. Add lines 4 through 21.	\$0.00
	972.00
22c. Add line 22a and 22b. The result is your monthly expenses.	
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a \$3,	507.64
23b. Copy your monthly expenses from line 22 above. 23b \$2,	972.00
23c. Subtract your monthly expenses from your monthly income.	535.64
The result is your monthly net income.	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No Yes Explain here:	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Dorothy	Α	Abiola
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)	-		

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below									
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
	✓ No									
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).								
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and								
×	/s/ Dorothy Abiola	×								
	Signature of Debtor 1	Signature of Debtor 2								
	Date 3/6/2017	Date								
	MM/DD/YYYY	MM/DD/YYYY								

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Fill in	n this info	rmation to identify your c	ase:					
Debt	or 1	Dorothy First Name	A Middle N	Abiola Name Last N	ame	_		
Debt (Spou	or 2 se, if filing)	First Name	Middle N	Name Last N	ame	_		
Unite	ed States	Bankruptcy Court for the:	Northern	District of III		_		
Case (If kno	number wn)			(S	itate)	_		
Off	ficial	Form 107						Check if this is a amended filing
		ent of Financia	l Affairs f	or Individuals	s Filina fa	or Bankru	intev	12/1:
Be as	s comple mation.	ete and accurate as po If more space is neede nown). Answer every q	ssible. If two maded, attach a sepa	arried people are filin	g together, bo	th are equally i	responsible for s	
Part	1: Giv	e Details About Your	Marital Status	and Where You Live	ed Before			
1.	What is	s your current marital sta	atus?					
	Ľ	arried ot married						
2.	During	the last 3 years, have yo	u lived anywhere	e other than where you	live now?			
	✓ No	s. List all of the places yo	ou lived in the last	: 3 years. Do not includ	e where you live	e now.		
	De	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same	as Debtor 1		Same as Debtor 1
	Nu	mber Street		From	Number S	treet		From
	Cit	y State	Zip Code		City	State	Zip Code	
					Same	as Debtor 1		Same as Debtor 1
	Nu	mber Street		From	Number S	treet		From To
	Cit	y State	Zip Code		City	State	Zip Code	
	and territo	ne last 8 years, did you e ories include Arizona, Califo Make sure you fill out So	ornia, Idaho, Louis	iana, Nevada, New Mexi	co, Puerto Rico,			

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Case number (if known)

Abiola

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$4522.72 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$33690.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$25000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Dorothy

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Abiola

Debtor 1 Dorothy __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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or 1	Dorothy		Α		oiola	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi orp ge	ders include your porations of which	relatives; and you are a for a busin	any general partner an officer, director, ness you operate a	s; relatives of any person in control,	general partners; par , or owner of 20% or	tnerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
✓	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No	_	aranteed or cosigne	-	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name				<u> </u>		
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Abiola Debtor 1 Dorothy Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Dorothy	A	Abiola	Case number (if known)	
	First Name	Middle Name	Last Name		
11.	Within 90 days before you accounts or refuse to make			bank or financial institution, set off any am	ounts from your
	✓ No Yes. Fill in the details.				
			Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name		-		_
	Number Street		_		
			_ Last 4 digits of account	number: XXXX-	
	City State	e Zip Code	-		
12.	Within 1 year before you file appointed receiver, a custo			possession of an assignee for the benefit of	of creditors, a court-
	✓ No ☐ Yes				
Part	5: List Certain Gifts and	d Contributions			
13.	Within 2 years before you	filed for bankruptcy, di	d you give any gifts with a t	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the details f	or each gift.			
	Gifts with a total value per person	of more than \$600	Describe the gifts	Dates you gave the gifts	Value
					_
	Person to Whom You G	ave the Gift	-		
	Number Street		-		
	City State Person's relationship to		-		
		you			
	Person to Whom You G	ave the Gift	-		
	Number Street		-		
	City State	e Zip Code	-		
	Person's relationship to				

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Debtor	Dorothy	Α	Abiola	Case number (if known)	
	First Name	Middle Name	Last Name		
14. W	ithin 2 years hefore w	ou filed for bankruptov, die	d you give any gifts or contrib	outions with a total value of more than \$60	0 to any charity?
_		ou med for bunkruptey, un	a you give any gints or continu	ations with a total value of more than \$00	o to any onanty.
⊻	=				
L	Yes. Fill in the detai	ls for each gift or contribut	ion.		
	Gifts or contribution		Describe what you cont		Value
	that total more tha	in \$600		contributed	
			_		
	Charity's Name				
	-		_		
	Number Street		_		
	City	State Zip Code			
Part 6:	List Certain Losse	~~			
ait o.	List Oci talli Loss	23			
		u filed for bankruptcy or si	nce you filed for bankruptcy,	did you lose anything because of theft, fire	e, other disaster, or
ga 	mbling?				
✓	No				
	Yes. Fill in the detail	ls.			
	Describe the prope	• •	Describe any insurance		Value of property
	how the loss occur	red	Include the amount that in pending insurance claims	· ·	lost
			A/B: Property.	on line 33 of <i>Schedule</i>	
Part 7:	List Certain Paym	nents or Transfers			
	No		or credit counseling agencies to	r services required in your bankruptcy.	
✓	1 Co. Till ill tile detail	ю.			
			Description and value of transferred	f any property Or transfer was made	t Amount of payment
	Semrad Law Firm		Attorney's Fee - 300.00	3/3/2017	\$300.00
	Person Who Was Pa	id		3.3.23.0	
	20 S. Clark Street		_		
	Number Street				
	28th Floor		_		
		Ilinois 60603	_		
	City	State Zip Code			
	Email or website add	Iress	-		
	Porson Who Mado th	ne Payment, if Not You	_		
	reison who made ti	ie rayillelli, ii Not Tou			
	Person Who Was Pa	id	_		<u> </u>
	Nivers In the Columbia		_		
	Number Street				
			-		
	City S	State Zip Code	-		
			_		
	Email or website add	Iress			
	Person Who Made th	ne Payment, if Not You	-		

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Debt		Dorothy First Name	A Middle Name	Abiola Last Name	Case number (if known)		
17.	help	p you deal with your creditors not include any payment or trans	or to make payment		behalf pay or transfer	any property to a	nyone who promised to
		Yes. Fill in the details.		Description and value of any p transferred	property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid Number Street					
		City State	Zip Code				
18.	the Incl	ordinary course of your busine	ess or financial affair ransfers made as secu	rity (such as the granting of a sec			
	_			Description and value of any property transferred	Describe any payments re in exchange	y property or ceived or debts pa	Date transfer was made
		Person Who Received Transfer Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfer Number Street					
		City State Person's relationship to you	Zip Code				
19.	ben	hin 10 years before you filed for seficiary? ese are often called asset-protect		ou transfer any property to a se	lf-settled trust or sim	ilar device of whic	:h you are a
	✓	No Yes. Fill in the details.		Description and value of the	property transferred		Dato
				Description and value of the	property transferred		Date transfer was made
		Name of trust					

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Abiola Debtor 1 Dorothy Case number (if known) List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Abiola Debtor 1 Dorothy Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb		Dorothy		A		biola	Cas	e number <i>(ii</i>	fknown)		
		First Name		Middle Name	La	st Name					
26.		e you been a part	y in any judic	cial or administ	rative proce	eding under	any environmen	ıtal law? İn	clude settler	nents and ord	ers.
		No Yes. Fill in the det	tails.								
					Court or ag	jency		Nature o	of the case		Status of the case
		Case title									Pending
					Court Name	•					On appeal
		Case number			NumberStre	eet					Concluded
		_			City	State	Zip Code				
Part	11:	Give Details Al	bout Your E	Business or C	onnections	s to Any Bu	siness				
27.	With	nin 4 years before	you filed for	bankruptcy, di	d you own a	business or	have any of the	following c	onnections t	o any busines:	s?
		A sole propri	ietor or self-e	mployed in a tr	ade, profes	sion, or other	activity, either for	ull-time or p	oart-time		
					LLC) or limite	ed liability pa	artnership (LLP)				
		A partner in a		o Inaging executi ^o	ve of a corp	oration					
		_		of the voting or e	-		ooration				
	✓	No. None of the a	above applie	s. Go to Part 12	2.						
		Yes. Check all that	at apply abo	ve and fill in the							
					Desc	ribe the natu	ire of the busine	SS			number Do not number or ITIN.
		Business Name							EIN:		
		Number Street			_				Dates busi	ness existed	
		City	State	Zip Code	Name	of account	ant or bookkeep	er	From	To	
		•		•							
					Desc	ribe the natu	ire of the busine	ss			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street							Dates busi	ness existed	
					Name	e of account	ant or bookkeep	er			
		City	State	Zip Code					From	To	
					Desc	ribe the natu	ıre of the busine	ss			number Do not
									include So EIN:	cial Security r	number or ITIN.
		Business Name			_				∟11¥.		
		Number Street			Name	e of account	ant or bookkeep	er	Dates busi	ness existed	
		City	State	Zip Code	- Naille	o or account	unt of bookkeep		From	То	

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Debt	tor 1 Dorothy		Α	Abiola	Case number (if known)		
	First Name		Middle Name	Last Name			
28.	Within 2 years creditors, or o		r bankruptcy, did y	ou give a financial statem	ent to anyone about your business? Include all financial institutions,		
	Yes. Fill in	the details below.					
	_			Date issued			
	Name			MM/DD/YYYY	_		
	INAITIE			, 23,			
	Number	Street		_			
			7: 0	<u> </u>			
	City	State	Zip Code				
Part	Part 12: Sign Below						
t	rue and correc	t. I understand tha	t making a false sta	atement, concealing prop	nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
	×	/a / Dawatha Ala	-1-		×		
		/s/ Dorothy Abi			Signature of Debtor 2		
		Date 3/6/2017			Date 3/6/2017		
	Did you attach	additional pages to	Your Statement of	f Financial Affairs for Indiv	riduals Filing for Bankruptcy (Official Form 107)?		
Į į	√ No						
į	Yes						
	Did you pay or a	agree to pay some	ne who is not an a	ttorney to help you fill out	bankruptcy forms?		
Į.	√ No						
Ī	Yes. Name	of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

		nem District of Illinois						
n re_	Dorothy A Abiola Debtor	_	Case No.	(If known)				
	Desitor	C	Chapter	Chapter 13				
1	DISCLOSURE OF COMPEI . Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2	016(b), I certify that I am the attor	rney for the abo	ovenamed debtor(s) and that				
	compensation paid to me within one year before the rendered or to be rendered on behalf of the debtor(s	e filing of the petition in bankrupt	cy, or agreed to	be paid to me, for services				
	For legal services, I have agreed to accept			\$4,000.00				
	Prior to the filing of this statement I have received			\$300.00				
	Balance Due			\$3,700.00				
2	. The source of the compensation paid to me was:							
	✓ Debtor □ C	Other (specify)						
3	. The source of the compensation paid to me is:							
	✓ Debtor □ C	Other (specify)						
4	I have not agreed to share the above-disclosed members and associates of my law firm.	compensation with any other per	son unless the	ey are				
	members or associates of my law firm. A copy of	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.						
5			er legal service for all aspects of the bankruptcy case, including: dering advice to the debtor in determining whether to file a petition in					
	b. Preparation and filing of any petition, sched	ules, statements of affairs and pla	an which may b	pe required;				
	c. Representation of the debtor at the meeting	of creditors and confirmation hea	aring, and any a	adjourned hearings thereof;				
	d. Representation of the debtor in adversary pr	oceedings and other contested b	ankruptcy mat	ters;				
6	. By agreement with the debtor(s), the above-disclose	ed fee does not include the follow	ving services:					
		CERTIFICATION						
	I certify that the foregoing is a complete statement of tor(s) in this bankruptcy proceedings.	any agreement or arrangement for	or payment to r	ne for representation of the				
	3/6/2017	/s/ Mike	Miller					
	Date	Signature o	f Attorney					
		Semrad L	aw Firm					
		Name of	law firm					

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00
- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$77.00 for expenses, leaving a balance due of \$4,087.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debter must be served with a copy of the application and notified of the right to appear in court to object.

Date: 3/3/2017	
Signed:	
/s/ Dorothy Abjola	1/10/
Docolly abrata	/s/ Mike Miller
Debtor(s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

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6. Advise the debtor of the need to maintain appropriate insurance.

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 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
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- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$77.00 for expenses, leaving a balance due of \$4,087.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Debtor(s)		Attorney for Debtor(s)	
		/s/ Mike Miller	
/s/ Doro	othy Abiola		
Signed:			
Date:	3/6/2017		

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

		filing fee administrative fee
+	<u> </u>	
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Abiola, Dorothy A Debtor(s)	Case No	
		Chapter.	Chapter13
	VERIFICA	ATION OF CREDITOR MAT	TRIX
Ti knowledge	he above named Debtors hereby verify t e.	hat the attached list of creditors is tr	rue and correct to the best of their
Date:	3/6/2017	/s/ Abiola, Dorot Abiola, Dorothy Signature of Del	A

TRUST REC SV 541 OTIS BOWEN DRI MUNSTER, IN, 46321

CAPITAL ONE AUTO FINAN 3901 DALLAS PKWY PLANO, TX, 75093

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL, 61364

STELLAR RECOVERY INC 1327 HWY 2 W KALISPELL, MT, 59901

CCI 501 Greene Street # 302 Augusta, GA, 30901

MONTGOMERY WARD 1112 7TH AVE MONROE, WI, 53566

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

CUSTOM COLL SRVS INC 55 E 86TH AVE STE A MERRILLVILLE, IN, 46410

PROFESSIONAL CREDIT SE 400 INTERNATIONAL WAY SPRINGFIELD, OR, 97477

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161 Emerald Financial Services PO Box 30040 Tampa, FL, 33630

John H. Stroger, Jr. Hospital of Cook County PO Box 70121 Chicago, IL, 60673

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

Linebarger Goggan Blair & Samplson, LLP 233 S WACKER #4030 Chicago, IL, 60606

Aarons 7311 S. Ashland Chicago, IL, 60636

Peoples Gas 200 E. Randolph Chicago, IL, 60601

IL Depart of Revenue PO Box 64338 Bankruptcy Section Chicago, IL, 60664

Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

URBAN PARTNERSHIP BANK 7054 S JEFFERY BLVD CHICAGO, IL, 60649

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Debtor 1 Dorothy First Name		Abiola Case numb	er (ifknown)
	estions for Reporting Purposes		
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individual	r consumer debts? Consumer deal primarily for a personal, family, or	ots are defined in 11 U.S.C. § 101(8) as
	No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or in No. Go to line 16c. Yes. Go to line 17.		are debts that you incurred to obtain on of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fi		mpt property is excluded and administrative insecured creditors?
18. How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 milli \$100,000,001-\$500 mil	n \$1,000,000,001-\$10 billion on \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be? Page 76. Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 millio \$100,000,001-\$500 mil	on \$10,000,000,001-\$50 billion
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Dorothy Abiola Signature of Debtor 1 I have chosen to lead the individual of		
	Executed on 3/3/2017 MM / DD	/YYYY Exec	outed on

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1.		요. 이 아이들인 반호하는 그 만이 아파를 ?	Maria de la Sagrafia en		
Fillindhisig	ormation to identify you	r Gaser			
Debtor 1	Dorothy First Name	A Middle Name	Abiola Last Name		
Debtor 2 (Spouse, if filing)		Middle Name	Last Name		
United States	Bankruptcy Court for the		istrict of Illinois		
Case number			(State)		
Official	Form 106D)ec		ANTONIA MARKA	Check if this is an amended filing
Declara	tion About ar	n Individual Debtor	's Schedules		12/15
If two marries	d people are filing toge	ther, both are equally responsib	le for supplying correct	information.	
U.S.C. §§ 152	, 1341, 1519, and 3571 in Below	u file bankruptcy schedules or a ection with a bankruptcy case ca	an result in fines up to \$	\$250,000, or imprisonment fo	or up to 20 years, or both. 18
☑ No					
Yes.	Name of person		Attach Bankruptcy Pe Signature (Official Fo	etition Preparer's Notice, Declar m 119).	ration, and
Under po	enalty of perjury, I decl y are true and correct,	are that I have read the summai	ry and schedules filed w	rith this declaration and	
	othy Abiola 0 000	ethy abrola	X Signature o	of Debtor 2	
Date 3/3	/2017		Date		The Control of the Co

MM/DD/YYYY

MM/DD/YYYY

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Debtor	1 Dorothy	· A	Abiola	Case number (if known)
	First Name	Middle Name	Last Name	- Control (In North)
28. W	ithin 2 years before y editors, or other part	rou filed for bankruptcy, did ties.	you give a financial state	ment to anyone about your business? Include all financial institutions,
Ž	No Yes. Fill in the deta	ils below.		
			Date issued	
	Name		MM/DD/YYYY	_
	Number Street			
	City	State Zip Code	питочи.	
Part 12	Sign Below			
Hue	nkruptcy case can re	orothy Abiola	tatement, concealing nro	aments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signatur	e of Debtor 1		Signature of Debtor 2
	Date 3/	/3/2017		Date 3/3/2017
Did y	ou attach additional	pages to Your Statement of	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
Z	No Yes			
Did y	ou pay or agree to p	ay someone who is not an a	ittorney to help you fill ou	t bankruptov forms?
manne.	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Abiola, Dorothy A		Case No		
	Debtar(s)				
		Chapter,	Chapter13		
	VERIF	FICATION OF CREDITOR MATI	RIX		
Th knowledge		erify that the attached list of creditors is tru			
Date:	3/3/2017	/s/ Abiola, Dorothy Abiola, Dorothy A	Direction Colored		

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Debt	or 1 Derothy First Name	A Middle Name	Abiola Last Name	Case number (if known)				
15.	6. Calculate the median family income that applies to you. Follow these steps:							
	16a. Fill in the state in which you		Illinois					
	16b, Fill in the number of people i	n your household.	2					
			To find a	list of applicable median income amounts, go online also be available at the bankruptcy clerk's office.	\$65,659.00			
17.	The state of the s	·						
	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3, Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).							
	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.							
Part				1)				
	Copy your total average monthly				\$3,438.89			
19.	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.							
	19a. If the marital adjustment does	s not apply, fill in 0 on it	ne 19a,		-\$0.00			
	19b. Subtract line 19a from line				\$3,438.89			
20.	Calculate your current monthly income for the year. Follow these steps:							
	20a. Copy line 19b.				\$3,438.89			
	Multiply by 12 (the number o	f months in a year).			x 12			
ž	20b. The result is your current mor	othly income for the year	r for this part of the form		\$41,266.68			
	20c. Copy the median family incom	ne for your state and siz	ze of household from line	: 16c.	\$65,659.00			
21. How do the lines compare?								
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.							
	Line 20b is more than or equa 4, The commitment period is t	I to line 20c. Unless oth 5 years. Go to Part 4,	erwise ordered by the co	urt, on the top of page 1 of this form, check box				
Partity Sign Below								
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.								
	/s/ Dorothy Abiola Signature of Debtor 1	ozothy al	ule ×	nature of Debtor 2				
	Date 3/3/2017 MM/DD/YYYY		Đa	MM/DD/YYYY				
	If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.							